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FACSIMILE COVER SHEET

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THIS TRANSMITTAL COVER SHEET): 17

OUR REFERENCE: 214980

FROM: JOHN KILYK, JR.
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TO: EXAMINER M. C. HENRY
GROUP 1623
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C.

TELEPHONE NUMBER: (703) 305-0522
FACSIMILE NUMBER: (703) 716-1778

IN RE APPLN. OF: GUPTA
APPLICATION NO. 10/056,567
FILED: January 25, 2002
FOR: FORMULATION OF BORONIC COMPOUNDS
GROUP ART UNIT: 1623
EXAMINER: Michael C. Henry

ATTACHED PLEASE FIND:

Form PTO-1083 (1 page in duplicate); and
Supplemental Response to Office Action including Certificate of Mailing (14 pages);

A confirmation copy of the transmitted document will:

☒ Not be sent. This will be the only form of delivery of the transmitted document.

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In re Application of: Gupta
Application No. 10/056,567
Filed: January 29, 2002
For: FORMULATION OF BORONIC ACID COMPOUNDS

Mail Stop
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a supplemental response to an office action in the subject application.

☐ Applicants claim small entity status of this application under 37 CFR 1.27.

☒ Petition for Extension of Time

☐ Applicants petition for a one-month extension of time under 37 CFR 1.136, the fee for which is (enclosed).

☒ Applicants believe that no petition for an extension of time is necessary. However, to the extent that such petition is deemed necessary, Applicants hereby petition for a sufficient extension of time to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.

☒ No additional claim fee is required.

☐ Other:

The claim fee has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADDIT. CLAIM FEE	RATE	ADDIT. CLAIM FEE
TOTAL	92	MINUS	92	=0	x 9=	\$	x 16=	\$0.00
INDEPENDENT	5	MINUS	5	=0	x 42=	\$	x 84=	\$0.00
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ 140=	\$	+ 280=	\$0.00
					TOTAL	\$	TOTAL	\$0.00

☐ Please charge my Deposit Account No. 12-1216 in the amount of \$0.00. A duplicate copy of this sheet is attached.

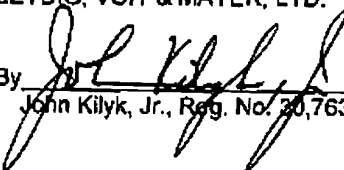
☐ A check in the amount of \$ is attached.

☒ The Commissioner is hereby authorized to charge any deficiencies in the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-1216. A duplicate copy of this sheet is attached.

☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,
LEYDIG, VOIT & MAYER, LTD.

By 
John Kilyk, Jr., Reg. No. 30,763

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Amendment or ROA Transmittal (Revised 9/1/03)

SEP. 25. 2003
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LVM 312 616 5700

NO. 4661 P. 3 **PATENT**

Attorney Docket No. 214980

DHHS Reference No. E-116-01/0

Date: September 25, 2003

In re Application of: Gupta

Application No. 10/056,667

Filed: January 29, 2002

For: FORMULATION OF BORONIC ACID COMPOUNDS

Mail Stop

Commissioner for Patents

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Alexandria, VA 22313-1450

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Amendment or ROA Transmittal (Revised 8/1/03)

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